

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. <b>R2184.0285/P285</b>	
		First Inventor <b>Hideki Agari</b>	
		Title <b>POWER SUPPLY IC HAVING SWITCHING REGULATOR AND SERIES REGULATOR</b>	
		Express Mail Label No. _____	

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>	<b>ADDRESS TO:</b> MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
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1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original, and a duplicate for fee processing)

2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.

3. ☒ Specification [Total Pages **32**]  
(preferred arrangement set forth below)

- Descriptive title of the invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the invention
- Brief Summary of the invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets **10**]

5. Oath or Declaration [Total Sheets \_\_\_\_\_]

- a. ☐ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)
- i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. ☐ Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

- a. ☐ Computer Readable Form (CRF)
- b. Specification Sequence Listing on:
  - i. ☐ CD-ROM or CD-R (2 copies); or
  - ii. ☐ Paper
- c. ☐ Statements verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9. ☐ Assignment Papers (cover sheet & document(s))

10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☐ Power of Attorney

11. ☐ English Translation Document (if applicable)

12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations

13. ☐ Preliminary Amendment

14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)

15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)

16. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).  
Applicant must attach form PTO/SB/35 or its equivalent.

17. ☒ Other: **Claim for Priority**

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:  
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_  
Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_  
**For CONTINUATION OR DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number: <b>24998</b>	<input checked="" type="checkbox"/> Correspondence address below
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Signature	Date <b>December 4, 2003</b>


120403

13281 U.S. PTO

PTO/SB/17 (10-03)

Approved for use through 7/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2004		Complete if Known																																	
Effective 10/01/2003, Patent fees are subject to annual revision.		Application Number	Not Yet Assigned																																
		Filing Date	Concurrently Herewith																																
		First Named Inventor	Hideki Agari																																
		Examiner Name	Not Yet Assigned																																
		Art Unit	N/A																																
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<b>TOTAL AMOUNT OF PAYMENT (\$)</b> 770.00																																			
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																	
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<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 04-1073 Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP		The Director is authorized to: (check all that apply)																																	
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1. BASIC FILING FEE																																			
<table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Description</th><th>Fee Paid</th></tr><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th></tr></thead><tbody><tr><td>1001</td><td>770</td><td>2001</td><td>385</td></tr><tr><td>1002</td><td>340</td><td>2002</td><td>170</td></tr><tr><td>1003</td><td>530</td><td>2003</td><td>265</td></tr><tr><td>1004</td><td>770</td><td>2004</td><td>385</td></tr><tr><td>1005</td><td>160</td><td>2005</td><td>80</td></tr><tr><td colspan="2" style="text-align: right;"><b>SUBTOTAL (1)</b></td><td colspan="2" style="text-align: right;">(\$)</td></tr></tbody></table>		Large Entity	Small Entity	Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1001	770	2001	385	1002	340	2002	170	1003	530	2003	265	1004	770	2004	385	1005	160	2005	80	<b>SUBTOTAL (1)</b>		(\$)			
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																																			
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Name (Print/Type) Mark J. Thronson		Registration No. (Attorney/Agent) 33,082																																	
Signature 		Telephone (202) 775-4742																																	
		Date December 4, 2003																																	